PTC/SB/06 (12-04)
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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | | | | playe a valid OMB control number. Il cation or Docket Number 428, 203 | | |
|---|--|---|---|-------------------------------|--------------|--|----------|--------------------|-----------------------------|-----|---|--|--|
| APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY | | | | | | | | | | OR | OTHER THAN SMALL ENTITY | | |
| Ĺ | FOR. | NU | NUMBER FILED | | NUMBER EXTRA | | 7 | RATE (S) | FEE (\$) | 7 | RATE (\$) | EEC (P) | |
| | SIC FEE CFR 1.16(a), (b), o | r (c)) | | | | | 11 | INTE OF | 1 25 147 | 1 | KOVIE (9) | FEE (\$) | |
| SE (37 | ARCH FEE CFR 1.16(1), (1), or | (m)) | | | | |] [| | | | | | |
| (37 | AMINATION FEE CFR 1.16(0), (p), o | | | | | |] [| • | | 7 / | | | |
| (37 | TAL CLAIMS CFR 1.18(i)) | | minus 20 = | | • | |] [| х - | / | OR | X = | | |
| (37 | DEPENDENT CL CFR 1.16(h)) | AIMS . | minus 3 = | | | • | 11 | х = | | 7 | х | | |
| (37 | CFR 1.16(s)) | sheets is \$250 additio 35·U.S | If the specification and of sheets of paper, the apple \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a | | | plication size fee due entity) for each fraction thereof. See and 37 CFR 1.16(s). | | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) | | | | | | | | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | | TOTAL | • |] | TOTAL | · | |
| <u>(</u> * | 420/08 | (Column 1) CLAIMS REMAINING AFTER | CLAIMS H EMAINING N AFTER PRE | | | Column 2) (Column 3) GHEST UMBER PRESENT EVIOUSLY EXTRA | | SMALL I | ADDI- TIONAL | OR- | OTHER SMALL RATE (5) | | |
| AMENDMENT | Total (37 CFR 1.186)) | AMENDMENT 37 | Minus | PAID | FOR 9 | | $\{ \}$ | ×25 - | FEE (\$). | OR | ×50 - | FEE (S) | |
| | Independent (37 CFR 1.16(b)) | 12 | Minus | | 0 | | ! | | - · · · · · · | 1 | | | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | ×100_= | | OR | ×200 - | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(II)) | | | | | | I | | | OR | | | |
| | | | | | | | | TOTAL ADO'L FEE | : | OR | TOTAL ADD'L FEE | | |
| _ | 4-12-07 | (Column 1) | · | | umn 2) | (Column 3) | | · | · . | • | | | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | .RATE (S). | ADDI- TIONAL PEE (\$) | | . RATE (S) | ADOL TIONAL FREE (\$) | |
| | Total (37 CFR-1.166)) | . 37 | Minus | 3 | ٩ |] " | | x = | | | x . | / | |
| | Independent (37 CFR 1.18(h)) | . 10 | Minus | ••• l | 0 | = | | | • | OR | x · | / • | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | ~`` | 7 | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) | | | | | | | | | OR | . / | | |
| TOTA ADDI. | | | | | | | | | • | OR | TOTAL ADD'L FEE | | |
| . • | * If the entry in column 1 is less than the entry in column 2, write "U" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | | | |

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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